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# **MicroRNAs as Potential Signatures of Environmental Exposure or Effect: A Systematic Review**

Karen Vrijens,<sup>1</sup> Valentina Bollati,<sup>2</sup> and Tim S. Nawrot<sup>1,3</sup>

<sup>1</sup>Centre for Environmental Sciences, Hasselt University, Diepenbeek, Belgium; <sup>2</sup>Center of Molecular and Genetic Epidemiology, Department of Clinical Sciences and Community Health, Università degli Studi di Milano, Milan, Italy; <sup>3</sup>School of Public Health, Occupational and Environmental Medicine, KU Leuven, Leuven, Belgium

**Address correspondence to** Tim S. Nawrot, Centre for Environmental Sciences, Hasselt University, Agoralaan gebouw D, B-3590 Diepenbeek, Belgium. Telephone: 0032/11-26.83.82. E-mail: [tim.nawrot@uhasselt.be](mailto:tim.nawrot@uhasselt.be)

**Running title:** MicroRNAs as potential signatures of the exposome

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## Abstract

**Background:** The exposome encompasses all life-course environmental exposures from the prenatal period onwards that influence health. MicroRNAs are interesting entities within this concept as markers and causation of disease. MicroRNAs are short oligonucleotide sequences that can interact with several mRNA targets.

**Objectives:** We discuss the current state of the field on microRNAs' potential as biomarkers for environmental exposure. We address miRNA signatures in response to all types of environmental exposure a human being can be exposed to; including cigarette smoke, air pollution, nanoparticles and diverse chemicals. We describe the health conditions the identified miRNAs have been reported in, i.e. cardiovascular disease, cancer and diabetes.

**Methods:** We searched the PubMed and ScienceDirect databases to identify relevant studies.

**Results:** For all exposures incorporated in this review, 27 miRNAs were differentially expressed in at least 2 independent studies. miRNAs with expression alterations associated with smoking observed in multiple studies are miR-21, miR-34b, miR-125b, miR-146a, miR-223 and miR-340 and those miRNAs observed in multiple studies with air pollution are miR-9, miR-10b, miR-21, miR-128, miR-143, miR-155, miR-222, miR-223 and miR-338. We found little overlap between *in vitro*, *in vivo* and human studies between miRNAs and exposure. We report on disease associations for those miRNAs identified in multiple studies on exposure.

**Conclusions:** MiRNA changes may be sensitive readouts of the effects of acute and chronic environmental exposure. Therefore miRNAs are valuable novel biomarkers for exposure. Further studies should elucidate the role of the mediation effect of miRNA between exposures and effect through all stages of life to provide a more accurate assessment of the consequences of miRNA changes.

## Introduction

Most common diseases result from the combined effect of genes and environmental factors and the interactions between these two. Epigenetic effects and non-coding gene products have gained research focus over the last two decades since protein-coding genes cannot account for all observed genomic effects. Here we focus on miRNAs as key regulators of health and disease. MiRNAs are endogenous, single-stranded, short non-coding RNA sequences (~22 nucleotides) that regulate gene expression at post-transcriptional level. Since the first discovery of miRNAs in *C. elegans* (Lee et al. 1993), hundreds of miRNAs in eukaryotes were identified that influence physiological processes such as development, growth, differentiation, immune reaction and adaptation to stress (van Rooij et al. 2007; Xiao et al. 2007). Diverse disease states such as cancer and heart failure are associated with distinct miRNA signatures suggesting that specific miRNA programs are activated in pathophysiological processes (Calin et al. 2005).

Recent advances in molecular biology opened the opportunity for new approaches in population based studies, in which exposures to a broad spectrum of environmental pollutants are evaluated in concert with biological systems, a concept proposed as the “exposome” (Wild 2005). From this viewpoint, miRNAs could potentially be novel biomarkers of exposure. For the purpose of this review, we focus on the response of miRNAs to environmental exposures.

### **MiRNA characteristics**

MiRNA-mediated gene silencing is accomplished by base pairing of the 5' region of miRNAs with the target mRNA sequence, leading to translational repression and/or mRNA degradation (Ambros 2004). miRNAs have been paradoxically shown to up-regulate gene expression by enhancing translation under specific conditions (Vasudevan et al. 2007). The effect of miRNA

expression on gene expression is not linear, as multiple miRNAs may target the same mRNA, and the majority of mRNAs contain multiple binding sites for miRNAs, generating a highly complex regulatory network system (Saetrom et al. 2007). For details on miRNA synthesis, biogenesis and their mechanism of action see figure 1 and reviews by (Djuranovic et al. 2011) and (Murchison and Hannon 2004).

### **miRNA nomenclature**

MicroRNAs are named using the “miR” prefix and a unique identifying number (e.g., miR-1, miR-2, etc.). The identifying numbers are assigned sequentially, with identical miRNAs having the same number, regardless of organism. Paralogous sequences whose mature miRNAs differ at only one or two positions are given lettered suffixes—for example, miR-10a and miR-10b. Distinct hairpin loci that give rise to identical mature miRNAs have numbered suffixes (e.g. mir-281-1 and mir-281-2). The mature sequences are designated ‘miR’ in the database, whereas the precursor hairpins are labeled ‘mir’. The -3p and -5p suffixes sometimes observed within an miR-name, refer to the arm the mature sequence comes from. For nomenclature guidelines, see (Ambros et al. 2003).

### **miRNA analysis techniques suitable for large epidemiological studies**

In recent years, miRNA expression changes following exposure to environmental toxicants, even before disease onset, have gained researchers’ interest. The measure of miRNAs in large epidemiological studies needs to be high throughput and sensitive enough to detect small changes in healthy subjects. At the same time, techniques need to be affordable to be conducted on large population studies. Moreover, given the complexity of phenomena induced by exposure, not fully explained by an effect on a single transcript, current research is going towards genome-

wide techniques. Another challenge is tissue specificity of miRNAs: the availability of only non-invasive samples in epidemiological studies conducted on healthy populations, limits our capability to investigate target tissues and opens important questions on the meaning of those markers in surrogate tissues. In epidemiologic research, free and exosomal miRNAs in bodily fluids are interesting study objects for their potential to serve as a proxy for tissue-specific miRNAs. A limitation of this approach is that these differ between different bodily fluids, and it is not clear what their function is. Although they hold promise as exposure biomarkers, current studies have been primarily disease-focused (reviewed in (Etheridge et al. 2011)).

Genome-wide miRNA analysis can be achieved by amplification-based (real-time quantitative PCR, qRT-PCR), hybridization-based (microarrays), and sequencing-based (next-generation sequencing (NGS)) technologies. The method to be selected depends upon the type of sample to be analyzed and the RNA preparation protocol used. qPCR is considered the gold standard because of its sensitivity, specificity, accuracy, and simple protocols. qPCR can evaluate candidate miRNA expression or array plates, evaluating a large number of miRNAs in one reaction, to OpenArray® that allows the simultaneous amplification of a very large panel of miRNAs using nanoscale volumes. A review article comparing qRT-PCR to different array-based platforms to study m(i)RNAs was recently published by (Prokopec et al. 2013).

Several miRNA microarray chip platforms are commercially available (Affymetrix GeneChip® miRNA 3.0 array, Agilent Human microRNA Microarrays system, Exiqon miRCURY LNA™ microarray) that differ in probe design and detection stringency. The limitation of this method is the availability and stringency of probes on the chip platform that pair with miRNAs of interest. Microarrays have the advantage of being easily correlated to mRNA expression data, thus providing functional information. Furthermore, unlike all other current miRNA analysis

techniques, microarrays allow fast analysis of all miRNAs without an arbitrary pre-selection step. However, the large amount of data produced can generate false positive results and a very time consuming step of validation by qPCR is almost a must.

Finally, NGS strategies based on deep sequencing overcome some of the technical drawbacks of probe-based methodologies, especially restriction to detection of only previously known sequences (Schulte et al. 2010). As miRNAs are sequenced directly, information about sequence variations or post-transcriptional RNA editing becomes available for further analysis. The newly developed Nanostring nCounter 27 uses two sequence-specific capture probes to allow for discrimination between similar variants of a single miRNA. NGS technologies (Illumina/Solexa, GA Roche/454 GS FLX Titanium, ABI/SOLID) allow complete miRnomes to be sequenced and allow for the discovery of novel miRNAs and isoforms. In addition, Another benefit of NGS technology is that it can identify precursor and primary miRNAs as well as their mature forms. NGS will likely become the gold standard for miRNA analysis because of its ability to sequence short fragments in a high-throughput mode. The choice between these methods is a key factor in establishing the possibility of success of any epidemiological study. Each method has PROs and CONs and need to be evaluated keeping in mind the specific research.

## **Methods**

### **Search strategy and selection criteria**

To identify the relevant papers to this topic, a comprehensive search was undertaken on the PubMed and ScienceDirect databases initially using ‘microRNA’ and ‘environmental exposure’ as key terms. We did additional searches in which we replaced microRNA by ‘mir’ or ‘miRNA’ or ‘epigenetic changes’ and we substituted ‘environmental exposure’ by ‘smoking’ or ‘passive

smoking’ or ‘cigarette smoke’ or ‘air pollution’ or ‘nanoparticle exposure’ or ‘bisphenol A’ or ‘endocrine disruptors’ or ‘chemical exposure’ in every possible combination. We also considered references found in our literature search and review articles. Only articles written in English were withheld. Both published and *in press* articles were incorporated in this review. The PubMed database was searched between January 1<sup>st</sup> 1980 and June 1<sup>st</sup> 2014. Articles dealing only with the description of SNPs in miRNA genes were disregarded, as were those articles dealing only with the description of miRNAs in non-mammalian species. A flowchart detailing the search strategy is shown in Figure 2. For those microRNAs differentially expressed in response to more than one personal or environmental exposure, we researched disease phenotypes correlated with them; by searching these miRs on the Human microRNA disease database (HMDD, <http://202.38.126.151/hmdd/mirna/md/>) and the miR2Disease database (<http://www.mir2disease.org/>). Results are shown in Table 1, including the direction of regulation (up or down) of the miRNA under investigation and the ensuing phenotype.

## Results

### Smoking-induced changes in miRNA expression

The most studied environmental factor in relation to epigenetics is smoking; it was among the first factors shown to affect the miRNA machinery in humans (Spira et al. 2004). Results for *in vitro* studies concerning smoking and miRs are summarized in table 2.

Izzotti analyzed miRNA expression patterns in mouse lung after exposure to passive cigarette smoke and they established life-course related miRNA expression changes by comparing miRNA expression in lungs from unexposed newborn, post-weaning and adult mice. They observed developmental-stage specific miRNA expression profiles in which miRNAs highly



expressed in newborns tended to be lower expressed in adult mice and *vice-versa*, whereas post-weaning mice represented an intermediate (Izzotti et al. 2009). Results from *in vivo* studies concerning smoking and miRs are shown in table 3.

Two studies report a comparison between mRNA and miRNA whole genome expression patterns for smokers and non-smokers (Schembri et al. 2009; Takahashi et al. 2013). The latter study showed that quitting smoking altered the plasma miRNA profiles to resemble those of non-smokers. Let-7c and miR-150 could be of importance in the initiation of smoke-induced decline of lung function, as genes that were associated with lung function impairment by GWAS are significantly enriched in binding sites for these miRs, namely STAT-3 (Qu et al. 2009) and TNFR-II (D'hulst et al. 2006).

The effect of *in utero* exposures on health in childhood and later in life is a growing area of research interest with major public health implications (Gluckman et al. 2008). An adaptive response in the fetus to *in utero* exposures can result in persistent changes into adulthood. MiRNA expression levels in placenta can affect health later in life (Maccani et al. 2011). *In utero* studies are included in table 4.

Not surprisingly, those miRNAs frequently observed down-regulated in response to smoking, have been identified as down-regulated in lung (Takamizawa et al. 2004), pancreatic (Vogt et al. 2011) and stomach (Rahman et al. 2009) cancer. Development of cardiovascular disease is associated with up-regulation of miR-206 (Shan et al. 2009) and this microRNA has significantly higher expression levels in smokers versus non-smokers. Furthermore, two miRs frequently down-regulated in association with cigarette smoke (i.e. miR-21 and miR-146a) have lowered expression levels in type II diabetes compared to healthy controls (Zampetaki et al. 2010).

Therefore, these miRNAs could contribute to the observation that smoking is an independent risk factor for type II diabetes (Cho et al. 2009). Human studies concerning smoking-induced changes of miRNA expression are summarized in table 4. Figure 3 depicts a Venn diagram displaying the common and distinct miRNAs from *in vitro*, *in vivo* and human studies on smoking-induced miRNA alterations. miR-125b and miR-21 identified in both *in vivo* and human studies, respectively, were also reported in *in vitro* studies. Furthermore, those miRNAs identified in multiple studies are indicated in bold, such as miR-34b and miR-146a.

MiRNAs with altered expression in response to environmental and/or personal exposures in at least two independent studies and their known roles in disease etiology are summarized in Table 1. miRNAs observed in association with either environmental or personal exposures are often associated with cancer; particularly breast and lung cancer and leukemia are frequently observed in table 1. Furthermore, many aberrations in the cardiovascular system are reported, such as hypertension, heart failure, myocardial infarct and atherosclerosis. It has been long known that exposures such as air pollution and smoking can cause cardiovascular disease and cancer (Pope et al. 2011); however this table argues for a causative role in disease etiology for the listed miRNAs; rather than them being merely a marker of exposure.

### **Air pollution exposure and miRNA expression**

Particulate matter (PM) is a complex mixture of small particles and liquid droplets. Particle pollution is made up of a number of components, including acids, organic chemicals, metals, and soil or dust particles. The size of particles is directly linked to their potential to cause health problems (Brunekreef and Holgate 2002). Although the clinical effects of PM exposure are obvious, the underlying mechanism of disease initiation/progression is less well understood. miRNAs play a pivotal role in maintaining the lungs healthy (Nana-Sinkam et al. 2009). As the

lungs are an important target site for PM, it is suggested miRNAs could underlie the observed health effects of PM exposure. *In vitro* studies on air pollution and miRNAs are summarized in table 5.

A cohort study amongst steel plant workers determined the effect of PM exposure on miRNA expression. Blood samples were collected at the beginning of the working week ('pre-exposure'), and at the end of the working week ('post-exposure'). PM mass and metal components were measured in the plant, and correlated with miRNA expression analyses of blood samples. Urinary 8-hydroxy-2'-deoxyguanosine (8-OH-dG) levels were measured as readout of oxidative stress. Both miR-222 and miR-21 were significantly increased in post- versus pre-exposure samples. Only miR-21 expression levels were positively correlated with 8-OH-dG (Bollati et al. 2010). As it has been reported that oxidative stress induces miR-21 expression (Cheng et al. 2009); the association between 8-OH-dG and miR-21 might simply reflect the response of miR-21 to ROS production in the blood due to the PM-induced increase in oxidative stress (Bollati et al. 2010) (Table 6).

The cardiovascular anomalies observed in association with air pollution exposure are often attributed to the generation of oxidative stress (Miller et al. 2012). MiR-21 is up-regulated in response to DEP and metal-rich PM (Bollati et al. 2010; Bourdon et al. 2012) and is highly expressed in the cardiovascular system where it plays an important role in vascular cell proliferation and apoptosis and disease (reviewed in (Cheng and Zhang 2010)). Therefore, miR-21 expression could be an important mechanistic link explaining the association between air pollution exposure and cardiovascular disease.

Levanen and colleagues (Levanen et al. 2013) observed distinct miRNA expression profiles in asthmatic patients versus controls after subway exposure. Current epidemiologic studies have identified the first miRs associated with air pollution exposure, and provide a list of putative biomarkers. Table 6 summarizes the human studies on air pollution and miRs. A Venn diagram displaying the common and distinct miRNAs from *in vitro* and human studies on air pollution-induced miRNA alterations is depicted in Figure 4. As can be seen from this figure, the only miRNAs identified in both *in vitro* as well as in human studies in association with air pollution exposure are miR-10b and miR-128. Furthermore, miRNAs -9, -21, -143, -155, -222, -223 and -338 were identified in at least two independent studies on air pollution and miRNA.

## **Nanoparticles**

Nanoparticles are emitted from natural and anthropic sources, and produced via nanotechnology. Fast propagation of nanotechnologies into different industries and consumer products is causing exponential growth of nano-materials production. Hence, increasing amounts of nanoparticles reach occupational settings and the indoor and outdoor environments, thus representing a potentially serious hazard to people's health (Castranova 2011; Nel et al. 2006). Nanoparticles are also able to cross cell membranes, and their interactions with biological systems are relatively unknown (Holsapple et al. 2005). Table 7 displays the studies on nanoparticle-induced changes in miRNA expression, all of which are performed in animal models.

## **Chemical exposure-induced changes in miRNA**

### ***Formaldehyde***

Formaldehyde is an air toxic present in the atmosphere due to emission from anthropogenic and biogenic sources. 95% of inhaled formaldehyde is absorbed within the respiratory tract (Overton

et al. 2001). Formaldehyde changes gene expression patterns in nasal and lung cells (Kim et al. 2002; Li et al. 2007). As can be observed from table 1, those miRNAs reported deregulated in association with formaldehyde exposure are involved in the development of diverse tumors (breast and gastro-intestinal cancer; melanoma) as well as heart failure. Given the capability of formaldehyde to pass deep into the lung tissue and enter the systemic circulation; the link with cardiovascular disease and cancer has been widely discussed and is reviewed in (Kim KH et al. 2011). Interestingly, miR-181a, one of the miRs down-regulated after formaldehyde exposure; was reported to affect the DNA damage response in breast cancer; enabling the identification of aggressive breast tumors based on increased miR-181a expression. (Bisso et al. 2013)

### ***Endocrine disruptors***

Organochlorine pesticides and plasticizing agents are ubiquitous environmental endocrine disrupting compounds that impact human health. (Rubin 2011) Bisphenol A (BPA) is an industrial plasticizer often used as coating in food cans and plastic bottles. (Kang et al. 2006) Dichlorodiphenyltrichloroethane (DDT) is a well-known organochlorine pesticide. Since DDT is very persistent in the environment, accumulates in fatty tissues, and can travel long distances in the upper atmosphere, residues from historical use still remain a current threat to human health.

DDT and BPA were shown to interfere with endogenous estrogens and thyroid hormone, leading to aberrations of the reproductive, immune and central nervous system (Chevrier et al. 2013; Liu et al. 2013). DDT (Waliszewski et al. 2001) and BPA (Takahashi and Oishi 2000) cross the placental barrier and can induce *in utero* effects that could lead to detrimental effects later in life.

Prenatal exposure to BPA can alter mammary development and lead to breast cancer in humans (Soto et al. 2013). From a clinical perspective, it is interesting to note that decreased expression

of Let-7f has been associated with increased breast cancer risk (Sakurai et al. 2012) and treatment of MCF-7 breast cancer cells leads to a reduction of Let-7f expression (Tilghman et al. 2012). Furthermore, miR-146a has been proposed to induce an Alzheimer's disease pathway (Jiang et al. 2013) and is up-regulated after BPA exposure (see table 1). Therefore, the neurodegenerative consequences of BPA exposure could at least partially be attributed to miR-146a. *In vitro* studies could provide researchers with interesting miRNAs that have potential to be used as biomarkers for chemical exposure.

Polychlorinated biphenyls (PCBs) were widely used organic chemicals until their production was banned due to environmental concerns (Porta and Zumeta 2002). PCBs are stable compounds that bio-accumulate in fatty tissues (Steele et al. 1986). PCBs cause systemic changes in gene expression (Ceccatelli et al. 2006) indicating miR regulation could be involved in this process. Maternal PCB exposure leads to fetal toxicity, impaired fetal growth and pregnancy loss (Tsukimori et al. 2008).

2,3,7,8-tetrachlorodibenzo-p-dioxin (TCDD) is a PCB that induces adverse health effects affecting the immune system (Faith and Luster 1979). Exposure of mothers during pregnancy affects the immune system of the fetus by suppressing T cell function (Camacho et al. 2004). Given the regulatory role miRs play in the immune system (Contreras and Rao 2012) it can be expected miRs are important in regulating the detrimental health effects observed after exposure to TCDD and other PCBs.

### ***Arsenic***

Environmental exposure to arsenic, especially the trivalent inorganic arsenic ( $\text{As}^{3+}$ ) is a health concern given the high doses present in groundwater across the world (Fendorf et al. 2010).

Exposure to arsenic is associated with increased risk of cancer due to genomic instability (Dulout et al. 1996). Long-term exposure to arsenic induces peripheral vascular injury (Tseng 2008). A Venn diagram displaying the common and distinct miRNAs from *in vitro* and human studies on arsenic-induced miRNA alterations is depicted in Figure 5. This Figure reveals only miRNA-21 is reported in association with arsenic exposure in *in vitro* model systems and in human studies. Three miRNAs were identified in at least two independent studies on arsenic exposure and miRNA expression, namely miR-26b, -181a, and -222.

### ***Aluminum sulfates***

Aluminum is the most widely distributed metal in the environment and is extensively used in daily life. Chronic exposure of animals to aluminum is associated with behavioral and neuropathological changes. Epidemiological studies have shown poor performance in cognitive tests and a higher abundance of neurological symptoms for workers occupationally exposed to aluminum (Kumar and Gill 2009).

### ***Hexahydro-1,3,5-trinitro-s-triazine (RDX)***

The polynitramine explosive RDX is a heavily used second generation high explosive, resulting in the contamination of soils, sediments, and water (Davis et al. 2004). RDX exposure causes toxicity to the neural and immune system and increases tumor incidence for several cancers (Garcia-Reyero et al. 2011; Sweeney et al. 2012).

### ***Xenoestrogen diethylstilbestrol (DES)***

The synthetic estrogen diethylstilbestrol (DES) was prescribed to prevent miscarriages from the 1940s to the 1960s, to be shown later it increased breast cancer and gynecologic tumor incidence (Greenberg et al. 1984; Mittendorf 1995).

### ***Perfluorooctanoic acid (PFOA)***

Perfluoroalkyl chemicals are highly stable and widely used in industrialized countries. PFCs are both lipo- and hydro-phobic, and after absorption will bind to proteins in serum and liver rather than accumulate in lipids. PFOA is one of the most commonly used PFCs. Tables 8-10 report on the studies on all chemical-induced changes in miRNA expression, subdivide into *in vitro* work (table 8), *in vivo* work (table 9) and human studies (table 10).

## **Conclusions**

MiRNAs are omni-present in the genome and are important regulators of gene expression in response to intracellular as well as environmental cues. We discussed the response of the miRNA machinery to personal and environmental exposures, including air pollution, cigarette smoking and chemicals such as endocrine disruptors. MiRNAs have been proposed as biomarkers for disease. The literature discussed here also reveals their potential to be used as biomarkers for environmental exposure.

All miRNAs identified in different studies looking at the same environmental pollutant showed similar patterns of expression regulation. In studies where smoking-induced changes were investigated, the general observation was a down-regulation of expression. For example, miR-125b was down-regulated in response to exposure to cigarette smoke both in primary human bronchial epithelial cells (Schembri et al. 2009) as well as in mouse lung tissue. (Izzotti et al. 2009) However, when unique miRNAs had altered expression patterns in response to different environmental exposures, their direction of regulation could be the same (10/25 miRs) or opposite (15/25 miRs, 60%). The different exposures discussed in this review have their own unique health effects, so one would not expect them to have the same effect on the miRNA



machinery. However, sometimes there is also a discrepancy when looking at the same exposure indicator, for example miR-21 has been described both up- and down-regulated in response to smoking (table 4). Part of the discrepancy can be explained by the different exposure models that were used.

In general, different *in vitro* studies show little overlap, potentially due to the complex miRNA-mRNA networks that underlie the observations; and the differences in exposure utilized across studies. When studying the same environmental pollutant *in vitro*, *in vivo* or in humans, identified miRNAs are quite distinct, as can be seen from figures 3, 4 and 5. This can be partially explained by the observation that animal models not always reflect genomic responses that occur in humans (Seok et al. 2013). Discrepancy between different studies might also stem from differences in exposure duration. As was shown in a study in rats, duration of exposure influences individual miRNAs' expression pattern uniquely (Izzotti et al. 2011).

Human epidemiologic studies are necessary to observe exposure-related effects on miRNAs. Understanding the exposome requires putting together pieces of a complex puzzle. Epidemiologic studies need input from experimental studies to identify good candidate biomarkers, and *vice-versa*, results from epidemiologic studies often need follow-up by experimental studies to investigate mechanisms of action and to study tissue-dependency of effects; since such studies mostly are performed in easily accessible tissues such as blood and saliva as a surrogate for the actual target tissues.

Currently, epidemiologic studies on microRNA often involve free or exosomal miRNAs present in saliva or other bodily fluids. The matter whether these are a true reflection of the body's response and can really predict health effects. At least in blood, it has been shown that

microRNAs contained within the exosomes overlap with cellular miRNA profiles where it was observed exosomes derived from blood are enriched for miRNAs and miRNA profiles between blood cells and the cell-free exosomal fraction show important overlap (Cheng et al. 2014).

As microRNAs can regulate mRNA expression both in a negative and in a positive manner, (Vasudevan et al. 2007) and since many miRNAs can bind the same mRNA, (Saetrom et al. 2007) it is hard to draw conclusions from miRNA studies without studying the concurrent mRNA(s) expression pattern. This information is rare in the current literature on epidemiologic studies of miRNAs. These findings underscore the complex networks that are built by miRNAs and the mRNAs they regulate, since one miR can influence many mRNAs according to the timing and its pattern of expression.

One note of caution, many of the discussed studies describe large-scale microarray profiling, whilst follow-up and validation with more quantitative approaches often lags behind. This is understandable because of the cost and labor-intensity inherent to these techniques; however it is a working point to identify the miRNAs responsive to environmental exposures.

The field is currently publishing extensive lists of microRNAs responsive to environmental exposures; demonstrating their utility as biomarkers of effect. Future research should focus on establishing the molecular mechanism behind miRNA expression changes in response to exposure; to determine whether the changes in miRNA expression are merely a symptom of the (patho)physiological processes the organism undergoes after exposure, or if miRNAs are the drivers responsible for these changes. For more information on the putative mechanisms of action behind miRNAs response to environmental exposure, see recent review by (Izzotti and Pulliero 2014). Furthermore, the effect on putative mRNA targets of the identified miRNAs

should also be studied to determine whether the miRNA expression change has functional consequences, and which mRNAs are true miRNA targets under the given circumstances.

At present, not much is known on whether environmental exposures induce long-term changes in human miRNA expression, or whether these have a transient character. In order to address this problem, more longitudinal studies should be conducted looking at the long-term effects of exposure. Results from animal studies suggest that miRNA expression changes in response to formaldehyde exposure are transient and revert to normal levels after recovery from exposure. (Rager et al. 2014); although others reported miRNA profiles in target organs do not recover one week after cessation of long-term cigarette smoke exposure (Izzotti et al. 2011). In humans; miRNA expression profiles of smokers have been observed to resemble those of non-smokers when people quit smoking (Takahashi et al. 2013).

Follow-up in future generations is necessary to determine the heritability of the miRNA expression changes. More in particular, it would be very interesting to look at the effect of *in utero* environmental exposures on development of disease in later life, and the role miRs play in inducing these health effects. Furthermore, long-term longitudinal studies would also allow to distinguish between cause and effect of miRNA expression and environmental exposure. They will also allow to estimate the contribution of miRNAs to disease development. MiRNAs have proven they can be used as biomarkers of disease as well as biomarkers for environmental exposure, and hold great potential to account for disease etiology.

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**Table 1.** MicroRNAs responsive to personal or environmental exposure and their role in human disease.

miRNA	Reg.	Exposure	Disease	Source
Let-7e	down	TCDD	HCC, lung, pituitary & breast cancer, GEP tumors	Feitelson and Lee 2007; Qian et al. 2009; Rahman et al. 2009; Sakurai et al. 2012; Takamizawa et al. 2004
	up	RDX	heart failure, asthma	Polikepahad et al. 2010; Thum et al. 2007
Let-7g	down	BPA, PM	lung carcinoma, GEP tumors, breast cancer	Rahman et al. 2009; Sakurai et al. 2012
miR-9	down	PM	brain cancer, Huntingon's disease	Ferretti et al. 2009; Lau and de Strooper 2010
	up	aluminum	Hodgkin lymphoma, breast cancer	Leucci et al. 2012; Ma et al. 2010
miR-10b	down	formaldehyde, PM	gastric cancer	Kim K et al. 2011
miR-21	down	smoking	diabetes type 2	Zampetaki et al., 2010
	up	DEP, metal rich PM	breast cancer, glioblastoma, neo-intimal lesions, cardiac hypertrophy, atherosclerosis	Ji et al 2007; Raitoharju et al. 2011; van Rooij et al. 2007; Volinia et al. 2006
miR-26b	down	DEP, BPA, PFOA	schizophrenia, CRC, breast cancer	Earle et al. 2010; Liu et al. 2011; Perkins et al. 2007
miR-31	down	DEP, TCDD	medulloblastoma, T cell leukemia	Ferretti et al. 2009; Yamagishi et al. 2012
miR-34b	down	smoking (2X)	CRC, pancreatic, mammary, ovarian and renal cell carcinoma	Vogt et al. 2011
miR-92b	down	smoking, DDT	medulloblastoma	Genovesi et al. 2011
miR-122	down	smoking	HCC	Bai et al. 2009
	up	TCDD	hepatitis C, renal cell carcinoma, male infertility, sepsis, hyperlipidemia	Gao et al. 2012; Henke et al. 2008; Wang C et al. 2011; Wang H et al. 2012; White et al. 2011
miR-125b	down	smoking (2X)	breast cancer, head and neck cancer	Nakanishi et al. 2013; Zhang et al. 2011
	up	aluminum sulfate (2X)	endometriosis, cardiac hypertrophy, Alzheimer's disease	Busk and Cirera 2010; Lukiw and Alexandrov 2012; Ohlsson Teague et al. 2009
miR-135b	down	DEP	medulloblastoma	Lv et al. 2012
	up	smoking	CRC	Nagel et al. 2008
miR-142	down	formaldehyde	heart failure	Voellenkle et al. 2010
	up	smoking	B cell ALL	Ju et al. 2009
miR-143	up	PM, ozone	colon cancer	Zhang et al. 2013
miR-146a	down	smoking	postpartum psychosis, type 2 diabetes	Weigelt et al. 2013; Zampetaki et al. 2010
	up	BPA, aluminum sulfate (2X)	Alzheimer's disease, Creutzfeldt Jacob disease, atherosclerosis, leukemia, protection against myocardial injury	Lukiw and Alexandrov 2012; Lukiw et al. 2011; Raitoharju et al. 2011; Wang et al. 2013; Wang Y et al. 2010
miR-149	up	BPA, DDT	melanoma	Jin et al. 2011
miR-155	down	PM	hypertension	Xu et al. 2008
	up	PM	breast cancer, Hodgkin lymphoma, B-ALL	Chang et al. 2011; Kong et al. 2014; Palma et al. 2014

miRNA	Reg.	Exposure	Disease	Source
miR-181a	down	formaldehyde	leukemia, glioma, NSCLC, breast cancer, metabolic syndrome and CAD	Gao et al. 2010; Hulsmans et al. 2012; Marcucci et al. 2008; Ota et al. 2011; Shi et al. 2008
	up	TCDD	severe pre-eclampsia, male infertility	Hu et al. 2009; Wang C et al. 2011
miR-203	down	smoking, formaldehyde	myeloma	Wong et al. 2011
miR-205	up	smoking (2x)	heart failure, lung cancer	Thum et al 2007; Yanaihara et al. 2006
miR-206	up	smoking, RDX	myocardial infarct, slows ALS progression, myotonic dystrophy	Gambardella et al. 2010; Shan et al. 2009; Williams et al. 2009
miR-222	up	metal-rich PM, BPA	severe pre-eclampsia, thyroid carcinoma, prostate cancer, breast cancer	Hu et al. 2009; Miller et al. 2008; Pallante et al. 2006
miR-223	down	smoking	AML	Eyholzer et al. 2010
	up	smoking	heart failure, atherosclerosis	Greco et al. 2012; Kin et al. 2012
miR-338-5p	down	formaldehyde	melanoma	Caramuta et al. 2010
	up	DEP	oral carcinoma	Scapoli et al. 2010
miR-340	down	Smoking		
	up	Smoking	heart failure, breast cancer	Thum et al. 2007; Wu et al. 2011
miR-638	up	BPA, DDT, arsenic	lupus nephritis	Dai et al. 2009
miR-663	up	BPA, DDT, arsenic	CTCL, nasopharyngeal carcinoma, burns	Liang et al. 2012; Ralfkiaer et al. 2011; Yi et al. 2012

HCC: hepatocellular carcinoma, GEP: gastroenteropancreatic, CRC: colorectal carcinoma, NSCLC: non-small cell lung carcinoma, CAD: coronary artery disease, ALS: Amyotrophic lateral sclerosis, CTCL: cutaneous T-cell lymphoma.

**Table 2.** *In vitro* studies on the effects of smoking on differential miRNA expression.

<b>miRNA</b>	<b>miR function</b>	<b>Regulation</b>	<b>Tissue/cell type</b>	<b>Source</b>
miR-15a	tumor suppressor	down	primary bronchial epithelial cells	Schembri et al. 2009
miR-125b	targets P53, stress response			
miR-199b	oncogene activation			
miR-218	tumor suppressor			
miR-31	apoptosis, tumor suppressor	up	normal and cancer lung cells	Xi et al. 2010
miR-21	fatty acid synthesis, apoptosis	up	human squamous carcinoma cells	Zhang et al. 2014
miR-452	targets CDK1	down	human alveolar macrophages	Graff et al. 2012

**Table 3.** *In vivo* studies on the effects of smoking on differential miRNA expression.

miRNA	miR function	Regulation	Tissue/cell type	Source
miR-34b	p53 effector	down	mouse lung	Izzotti et al. 2011
miR-421	targets SMAD4, polycomb gene CBX7, ATM			
miR-450b	no validated targets			
miR-466	no validated targets			
miR-469	mouse miR not validated			
miR-135b	inflammation, oxidative stress	up	mouse lung	Halappanavar et al. 2013
miR-206	targets SERP1, BDNF, FOXP1	up	rat serum	Wu J et al. 2013
miR-133b	targets LAG1 and PTBP2			
miR-20b	hypoxia	down	mouse lung and plasma	Huang et al. 2012
miR-30e	targets UBC9, UBE21, MUC17			
miR-125b	targets p53, stress response			
miR-128	apoptosis			
let-7a	cell proliferation, angiogenesis	down	mouse lung	Izzotti et al. 2009
let-7b	cell proliferation, angiogenesis			
let-7f	cell proliferation, angiogenesis			
miR-26a	transforming growth factor expression			
miR-30b	cell adhesion, stress response			
miR-30c	cell cycle, oncogene activation			
miR-34b	p53 effector			
miR-99b	apoptosis			
miR-122a	stress response			
miR-124a	stress response, cell growth and differentiation			
miR-125a	oncogene activation, ROS			
miR-125b	targets p53, stress response			
miR-140	p53 effector			
miR-192	oncogene activation			
miR-431	protein repair, oncogene activation			
miR-92b	tumor suppressor miR	down	mouse serum	Yuchuan et al. 2014
miR-668	inflammation			
miR-700	inflammation			
Let-7e	apoptosis	up	mouse serum	Yuchuan et al. 2014
miR-19a	oncomiR			
miR-142	immunology			
miR-191	oncomiR			
miR-350	unknown			

reg: regulation.



**Table 4.** Human studies on the effects of smoking on differential miRNA expression.

miRNA	miR function	Regulation	Tissue/cell type	Source
miR-16	p53, cell cycle, JAK/STAT signaling	down	placenta	Maccani et al. 2010
miR-21	fatty acid synthesis, apoptosis			
miR-146a	inflammation, NFκβ mediator			
miR-223	immunology	up	maternal and cord blood	Herberth et al. 2013
miR-129	cell cycle regulation, apoptosis	down	spermatozoa	Marczylo et al. 2012
miR-634	inflammation			
miR-340	cell migration and invasion	up	spermatozoa	Marczylo et al. 2012
miR-365	targets NKX2.1			
miR-143	cardiogenesis	down	gastric tissue	Stanitz et al. 2013
miR-21	fatty acid biosynthesis, apoptosis	up	gastric tissue	Stanitz et al. 2013
Let-7c	cell proliferation, angiogenesis	down	induced sputum	Van Pottelberge et al. 2011
miR-146a	inflammation, NFκβ mediator			
miR-150	hematopoiesis			
miR-203	DNA damage response			
miR-340	cell migration and invasion			
miR-443	unknown			
miR-223	immunology	down	plasma MV	Badrnya et al. 2014
miR-29b	apoptosis	up	plasma MV	Badrnya et al. 2014
RNU6-2	reference miR			

**Table 5.** *In vitro* studies on air-pollution induced changes in miRNA expression.

miRNA	miR function	Regulation	Tissue/cell type	Pollutant	Source
miR-26b	Wnt, p53, autophagy, TGF- $\beta$	down	primary human bronchial epithelial cells	10 $\mu\text{g}/\text{cm}^2$ DEP	Jardim et al. 2009
miR-27a	apoptosis, ER $\alpha$				
miR-31	apoptosis, tumor supressor				
miR-96	several unrelated targets				
miR-135b	inflammation, oxidative stress				
miR-374a	targets DICER, ATM				
miR-513c	no validated targets	up	primary human bronchial epithelial cells	10 $\mu\text{g}/\text{cm}^2$ DEP	Jardim et al. 2009
miR-513b	no validated targets				
miR-513a-5p	targets CD274, immunology				
miR-923	fragment of 28S RNA				
miR-494	targets PTEN				
miR-338-5p	ABC transporters, endocytosis				
miR-10b	angiogenesis	down	human A549 lung carcinoma cell line	1 ppm CH <sub>2</sub> O	Rager et al. 2011
miR-181a	apoptosis, oncomiR				
miR-330	targets E2F1, VEGFa, NTRK3				
miR-338-5p	ABC transporters, endocytosis				
miR-375	immunology	up	human bronchial epithelial cells	3 $\mu\text{g}/\text{cm}^2$ DEP	Bleck et al. 2013
miR-149	immunology	down	monkey airway epithelial cells	ozone	Clay et al. 2014
miR-128	apoptosis	up	human A549 lung carcinoma cell line	PM <sub>10</sub>	Motta et al. 2013

DEP: diesel exhaust particles, CH<sub>2</sub>O: formaldehyde.

**Table 6.** Human studies on air-pollution induced changes in miRNA expression.

miRNA	miR function	Regulation	Tissue/cell type	Pollutant	Source
miR-21	fatty acid synthesis, apoptosis	up	peripheral blood	300 µg PM <sub>2.5</sub> /m <sup>3</sup> DEP	Yamamoto et al. 2013
miR-30e	targets UBC9, MUC17				
miR-144	targets Klf4, FGF, PLAG1				
miR-215	cell cycle, p53 activation				
miR-21	fatty acid synthesis, apoptosis	up	blood leukocytes	metal-rich PM	Bollati et al. 2010
miR-222	cell cycle regulation				
miR-375	Immunology	up	bronchial epithelial cells	3 µg/cm <sup>2</sup> DEP	Bleck et al. 2013
miR-34a	cardiogenesis	up	gastric tissue	urban living	Stanitz et al. 2013
miR-143	cardiogenesis				
miR-10b	angiogenesis	up	spermatozoa	metal-rich PM	Li et al. 2012a
miR-33b	lipid metabolism				
miR-106a	oncomiR				
miR-155	inflammation				
miR-183	oncomiR				
miR-205	oncomiR				
miR-208a	cardiac hypertrophy				
miR-222	cell cycle regulation				
miR-223	immunology				
Let-7d	proliferation, angiogenesis	down	spermatozoa	metal-rich PM	Li et al. 2012a
miR-363	DNA damage response				
miR-25	DNA damage response	up	induced sputum	ozone	Fry et al. 2014
miR-132	angiogenesis				
miR-143	cardiogenesis				
miR-145	tumor suppressor				
miR-199a	oncogene activation				
miR-199b	oncogene activation				
miR-222	cell cycle regulation				
miR-223	immunology				
miR-424	angiogenesis				
miR-582	anti-apoptosis				
miR-1	apoptosis	down	leukocytes	PM <sub>2.5</sub> ; BC; OC; SO <sub>4</sub> <sup>2-</sup>	Fossati et al. 2014
miR-9	neuronal differentiation				
miR-21	fatty acid synthesis, apoptosis				
miR-126	angiogenesis				
miR-135a	inflammation				
miR-146a	inflammation, NFκB mediator				
miR-155	inflammation				
miR-222	cell cycle regulation				
miR-128	apoptosis	up	plasma microvesicles	PM <sub>10</sub>	Motta et al. 2013

DEP: diesel exhaust particles, PM: particulate matter, BC: black carbon, OC: organic carbon.

**Table 7.** Studies on nanoparticle-induced changes in miRNA expression.

miRNA	miR function	Regulation	Pollutant	Source
miR-21	fatty acid synthesis, apoptosis	up	0.268 or 0.162 mg carbon black NP	Bourdon et al. 2012
miR-135b	inflammation, oxidative stress			
miR-146	inflammation, NFκβ mediator			
miR-122	stress response	up	70 nm in silica NP	Nagano et al. 2013
miR-192	oncogene activation			
Let-7a	cell proliferation, angiogenesis	up	100 nm gold NP	Balansky et al. 2013
miR-183	oncomiR			

NP: nanoparticles.

**Table 8.** *In vitro* studies on chemically induced changes in miRNA expression.

miRNA	miR function	Regulation	Tissue/cell type	Chemical	Source
let-7g	cell proliferation, angiogenesis	down	MCF-7 cells	BPA	Tilghman et al. 2012
let-7f	cell proliferation, angiogenesis				
miR-21	fatty acid biosynthesis, apoptosis				
miR-26b	Wnt, p53, autophagy, TGF- $\beta$				
miR-342-3p	tumor suppressor miR				
miR-15b	tumor suppressor targeting BCL2	down	MCF-7 cells	BPA/DDT	Tilghman et al. 2012
miR-222	cell cycle regulation	up	MCF-7 cells	BPA	Tilghman et al. 2012
miR-638	no known function	up	MCF-7 cells	BPA/DDT	Tilghman et al. 2012
miR-663	immunology, oxidative stress	down	MCF-7 cells	DDT	Tilghman et al. 2012
miR-1915	no known function				
miR-27b	angiogenesis				
miR-92a	tumor suppressor miR				
miR-92b	tumor suppressor miR				
miR-1308	no known function	up	MCF-7 cells	DDT	Tilghman et al. 2012
miR-146a	inflammation, NF $\kappa$ B mediator	up	human placental cell lines	BPA	Avisar-Whiting et al. 2010
miR-150	hematopoiesis	down	Jurkat T cell line	arsenic	Sturchio et al. 2014
miR-30d	autophagy	up	Jurkat T cell line	arsenic	Sturchio et al. 2014
miR-142	immunology				
miR-181a	apoptosis, oncomiR				
miR-221	DNA damage response				
miR-222	cell cycle regulation				
miR-638	no known function				
miR-663	immunology, oxidative stress				
miR-190	oncomiR	up	human bronchial epithelial cells	arsenic	Beezhold et al. 2011
miR-19b	oncomiR	up	HUVEC cells	arsenic	Li et al. 2012b
miR-21	fatty acid biosynthesis, apoptosis				
miR-24	oncomiR				
miR-29b	apoptosis				
miR-33a	lipid metabolism				
miR-198	cell proliferation				
miR-508-5p	cell invasion and migration				
miR-1252	no known function				
miR-181a	apoptosis, oncomiR	up	HepG2 cells	PAH	Song et al. 2013
miR-181b	apoptosis, oncomiR				
miR-181d	apoptosis, oncomiR				

**Table 9.** *In vivo* studies on chemically induced changes in miRNA expression.

miRNA	miR function	Regulation	Tissue/cell type	Chemical	Source
let-7e	apoptosis	down	fetal mouse thymocytes	TCDD	Singh et al. 2012
miR-18b	apoptosis				
miR-23a	apoptosis				
miR-23b	apoptosis				
miR-27a	apoptosis, ER $\alpha$				
miR-28	apoptosis				
miR-29a	apoptosis				
miR-31	apoptosis, tumor suppressor miR				
miR-98	apoptosis				
miR-101b	apoptosis				
miR-181c	apoptosis, oncomiR				
miR-182	apoptosis				
miR-200a	apoptosis, cell cycle, MAPK				
miR-23	apoptosis				
miR-290	apoptosis				
miR-335	apoptosis				
miR-491	apoptosis, targets BCL-XL				
miR-122	stress response	up	fetal mouse thymocytes	TCDD	Singh et al. 2012
miR-181a	oncomiR				
miR-125b	targets P53, stress response	up	monkey nasal epithelium	formaldehyde	Rager et al. 2013
miR-152	tumor suppressor, methylation				
miR-219	NMDA receptor signaling				
miR-532	unknown				
miR-22	PTEN, AKT signaling	down	monkey nasal epithelium	formaldehyde	Rager et al. 2013
miR-26b	Wnt, p53, autophagy, TGF- $\beta$				
miR-29a	apoptosis				
miR-140	p53 effector				
miR-142	Immunology				
miR-145	tumor suppressor, stem cell different				
miR-203	DNA damage response				
miR-374a	targets DICER, ATM				
miR-520f	Unknown				
miR-27a	apoptosis, ER $\alpha$	down	mouse brain and liver	RDX	Zhang and Pan 2009
miR-200c	Apoptosis				
let7-e	Apoptosis				
miR-206	targets SERP1, BDNF, FOXP1				
miR-451	targets PI3K/AKT	down	rat liver	PFOS	Wang et al. 2014

miRNA	miR function	Regulation	Tissue/cell type	Chemical	Source
miR-23a	Apoptosis	up	rat liver	PFOS	Wang et al. 2014
miR-25	DNA damage response				
miR-125a	oncogene activation, ROS				
miR-133a	smooth muscle differentiation				
miR-133b	targets LAG1 and PTBP2				
miR-206	targets SERP1, BDNF, FOXP1				
miR-494	targets PTEN				
miR-542	DNA damage response				

**Table 10.** human studies on chemically induced changes in miRNA expression.

miRNA	miR function	Regulation	Tissue/cell type	Chemical	Source
miR-191	oncomiR	up	peripheral blood	PCB-169	Guida et al. 2013
miR-146a	inflammation, NFκβ mediator	up	fetal brain cells	aluminum	Pogue et al. 2009
miR-9	neuronal differentiation				
miR-125b	targets p53, stress response	up	fetal brain cells	aluminum	Lukiw and Pogue, 2007
miR-128	apoptosis				
miR-199a	oncogene activation	up	serum	PFOA	Wang J et al. 2012
miR-21	fatty acid biosynthesis,apoptosis	up	blood samples	arsenic	Kong et al. 2012
miR-26b	Wnt, p53, autophagy, TGF-β				
Let-7a	cell proliferation, angiogenesis	up	cord blood	arsenic	Rager et al. 2014
miR-16	p53, cell cycle, JAK/STAT				
miR-17	DNA damage response				
miR-20a	angiogenesis				
miR-20b	hypoxia				
miR-26b	Wnt, p53, autophagy, TGF-β				
miR-96	several unrelated targets				
miR-98	apoptosis				
miR-107	targets Notch2				
miR-126	angiogenesis				
miR-195	tumor suppresomiR				
miR-454	unknown				
miR-24	oncomiR	down	plasma	PAH	Deng et al., 2014
miR-27a	apoptosis, ERα				
miR-28	aApoptosis				
miR-142	immunology				
miR-150	hematopoeiesis	up	plasma	PAH	Deng et al., 2014



## Figure Legends

**Figure 1.** Overview of miRNA biogenesis. The canonical maturation of a miRNA includes the production of the primary miRNA transcript (pri-miRNA) by RNA polymerase II or III and cleavage of the pri-miRNA by the microprocessor complex Drosha–DGCR8 (Pasha) in the nucleus. The resulting precursor hairpin, the pre-miRNA, is exported from the nucleus by Exportin-5–Ran-GTP. In the cytoplasm, the RNase Dicer in complex with the double-stranded RNA-binding protein TRBP cleaves the pre-miRNA hairpin to its mature length. The functional strand of the mature miRNA is loaded together with Argonaute (Ago2) proteins into the RNA-induced silencing complex (RISC), where it guides RISC to silence target mRNAs through mRNA cleavage, translational repression or deadenylation, whereas the passenger strand (black) is degraded.

**Figure 2.** Flowchart of included studies.

**Figure 3.** Venn diagram displaying common and distinct microRNAs associated with smoking from *in vitro*, *in vivo* and human studies. Those miRNAs listed in bold were identified in more than one study included in this meta-analysis.

**Figure 4.** Venn diagram displaying common and distinct microRNAs associated with air pollution exposure from *in vitro* and human studies. Those miRNAs listed in bold were identified in more than one study included in this meta-analysis.

**Figure 5.** Venn diagram displaying common and distinct microRNAs associated with arsenic exposure from *in vitro* and human studies. Those miRNAs listed in bold were identified in more than one study included in this meta-analysis.

Figure 1.

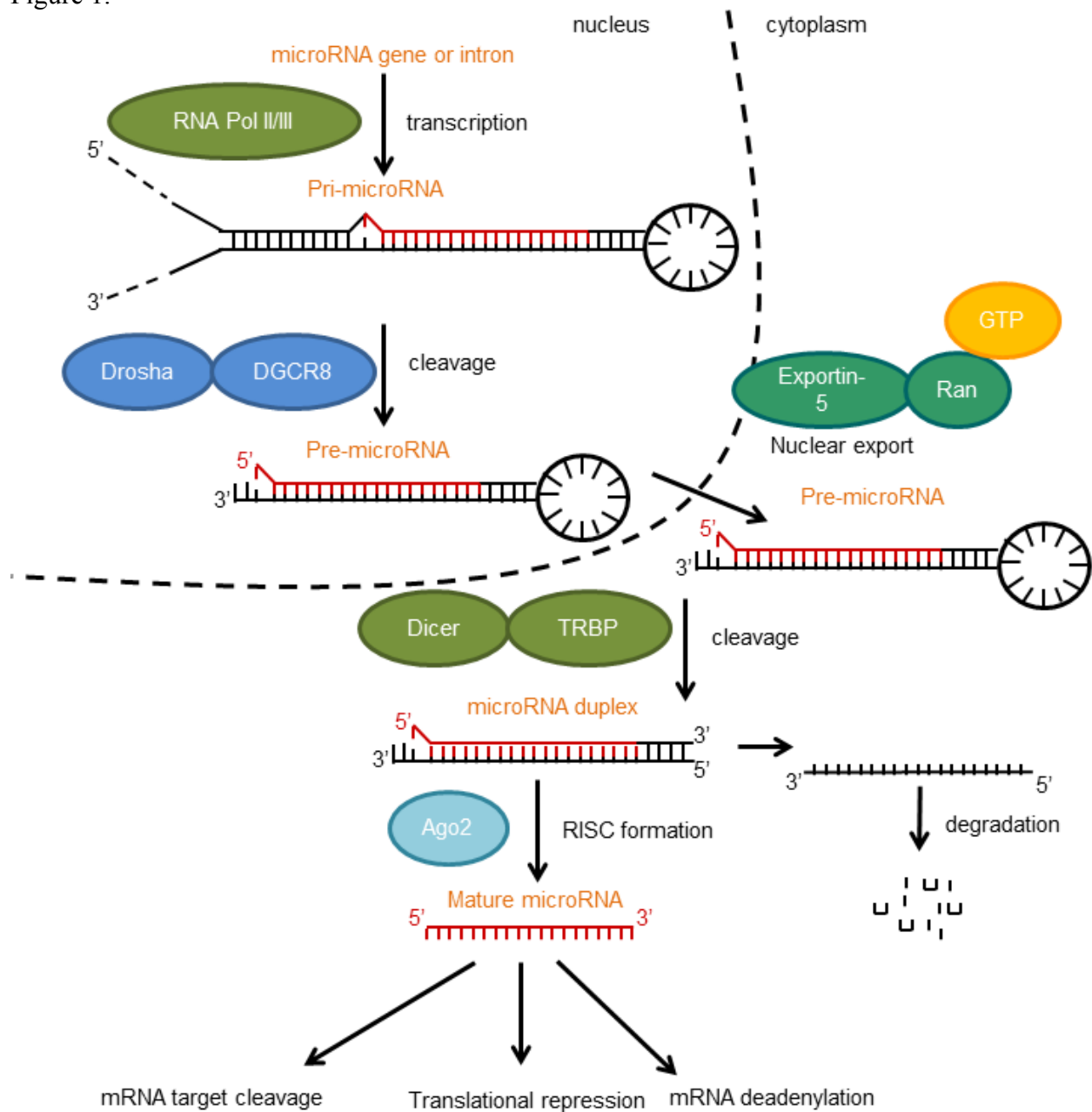


Figure 2.

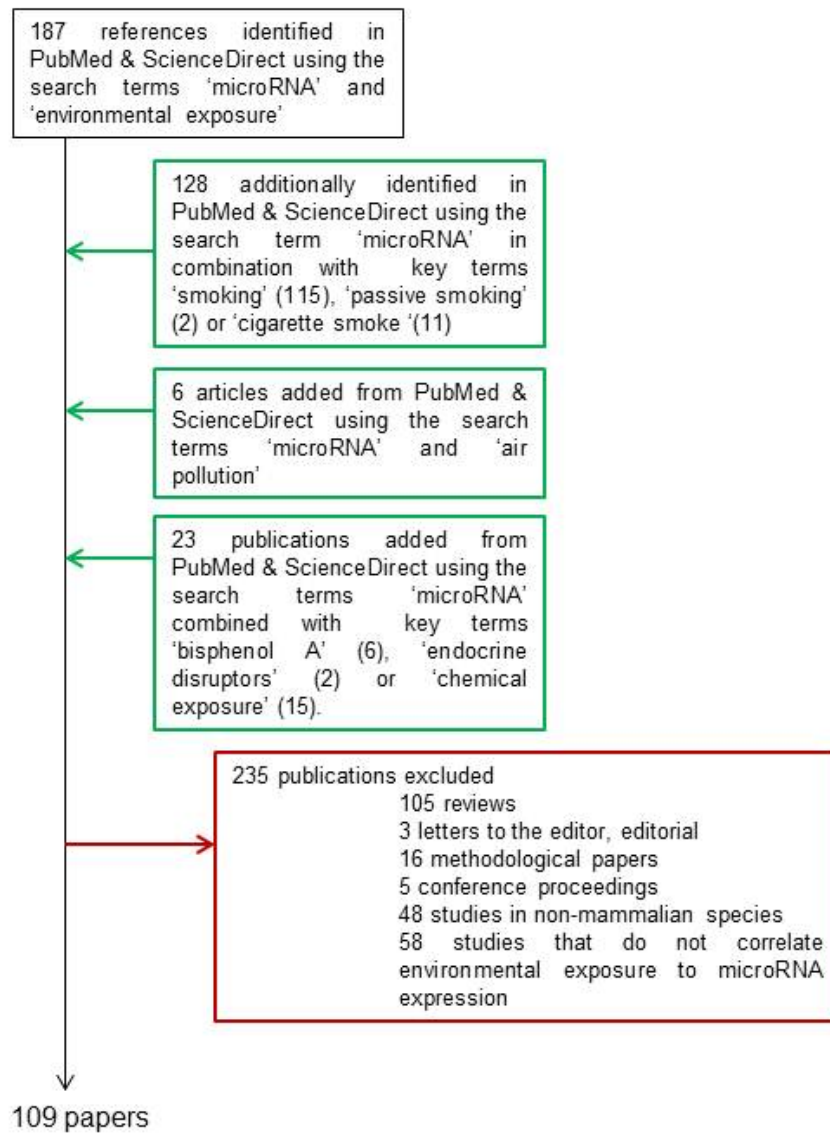


Figure 3.

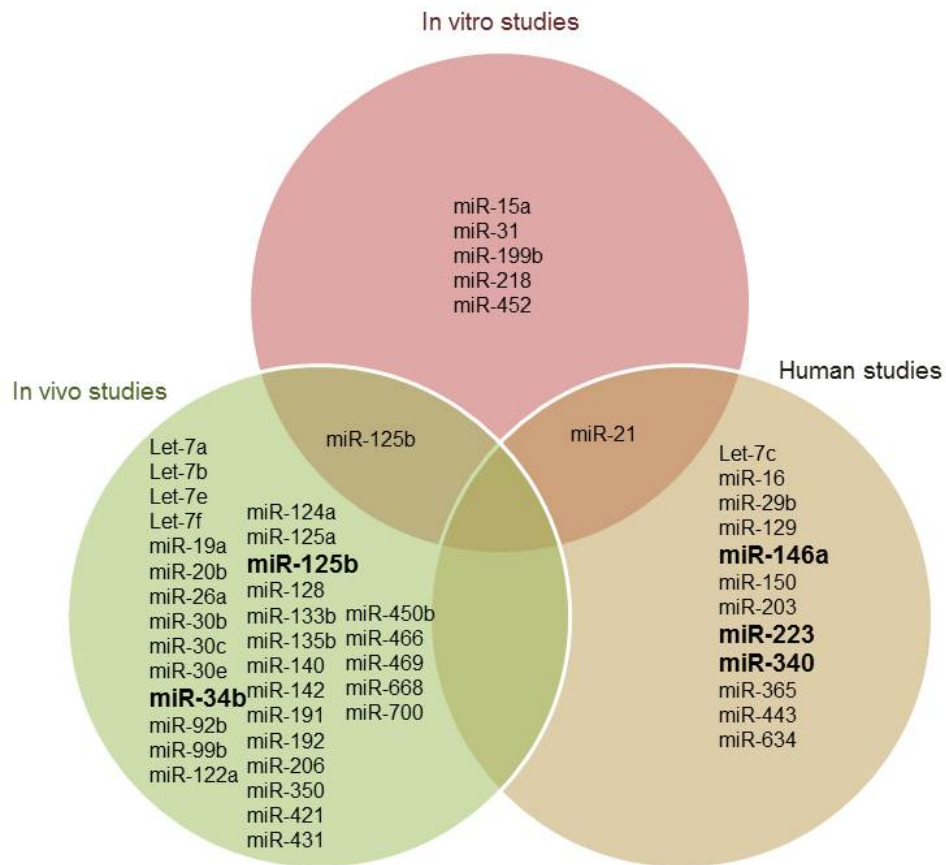


Figure 4.

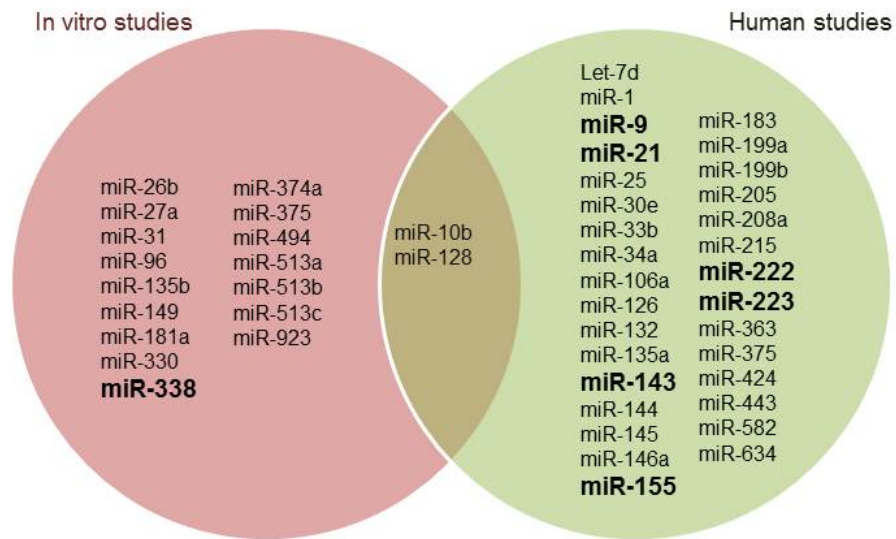


Figure 5.

